PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

Complete if Known

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Effective on 12/08/2004. Description of the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
FEE TRANSMITTAL			Application Number 10/815,305					
			Filing Date	April 1, 2	l 1, 2004			
For FY 2005		First Named Invento	or Anthony	nthony M. Rettinger et al.				
Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Leslie A.	Leslie A. Wong				
		Art Unit	1761	1761				
TOTAL AMOUNT OF PAYMENT	(\$)	450.00	Attorney Docket No	. 26416/05	5042			
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 03-0172 Deposit Account Name: Calfee, Halter & Griswold								
For the above-identified de	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments								
Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038. FEE CALCULATION								
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
Application Type Fee	Small En (\$) Fee (\$	ntity	Smail Entity		<u>l·Entity</u> e (\$) Fe	es Paid (\$)		
Utility 300		500		200 10	<u> </u>			
Design 200		100			55 <u> </u>			
Plant 200		300			80			
Reissue 300	-	500	7	600 30				
Provisional 200		0	0	0	0			
2. EXCESS CLAIM FEES				_	Small I			
Fee Description Each claim over 20 (including Reissues) Fee (\$) 50 25								
Each independent claim over 3 (including Reissues) 200 100						-		
Multiple dependent claims			360 18					
	Claims	Fee (\$) Fee	Paid (\$)		luitipie Depender			
- 20 or HP = HP = highest number of total claims	paid for, if great	er than 20.		1	<u>Fee (\$) </u>	e Paid (\$)		
indep. Claims Extra	Claims		Paid (\$)	_				
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): One-month extension of time 450								
SUBMITTED BY								
Registration No. 50,627 Telephone (216) 622-8895						622-8895		
Name (Print/Type) Kristin J. Frost Date April 25, 2005								

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	PETITION FOR EXTENSION OF 1	Docket Number (Optional) 26416/05042						
	OIPE	In re Application of Anthony Michael Rettinger						
	8	Application Number 10/815,305	Filed 4/1/2004					
	APR 2 8 2005	For PROCESS FOR PREPARING MICROBIOLOGICALLY SAFE CHOCOLATE PARTICULATES TO YOGURT						
	JOANEMARK C	Group Art Unit 1761	Examiner Leslie A. Wong					
	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):							
	One month (37 CFR 1.17(a)	(1))	\$					
	Two months (37 CFR 1.17(a	\$450_						
	Three months (37 CFR 1.17(a)(3)) \$							
	Four months (37 CFR 1.17(a	\$						
	Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown							
	above is reduced by one-half, and the resulting fee is: \$							
	A check in the amount of the fee is enclosed.							
	Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this							
	application to a Deposit Account.							
	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-0172.							
	I have enclosed a duplicate copy of this sheet.							
	I am the applicant/inventor							
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
	attorney or agent under 37 CER 1 31(a)							
	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)							
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
	April 25, 2005	Gustin	J. Frost					
04/29/2005	BABRAHA1 00000016 10815305	Kristin J. Frost, Re	g. No. 50.627					
01 FC:1252	450.00 GP		l or printed name					
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
	Total offorms are submitted	Total offorms are submitted.						